	Attorney Docket No.:		SC130								
TION ION	First Inventor:			William C. Moyer							
UTILITY PATENT APPLICATION	Title:			SING SYSTEM HAVING INSTRUCTION OR SIMD OPERATIONS AND METHOD	o ≢						
TRANSMITTAL	Title.	THERE	•								
	Express	s Mail Label No.: EV322113585US									
(Only for new nonprovisional applications under 37 CFR 1.53(b))											
APPLICATION ELEMENTS				fail Stop Patent Application	39						
(see MPEP chapter 600 concerning ADDI			DDRESS TO: Commissioner for Patents								
utility patent application contents		P. O. Box 1450 Alexandria, VA 22313-1450									
. Tyle m interior					-						
Fee Transmittal Form in du (Submit an original and a duplicate)	-	ecina)	7.	CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)							
2. Applicant claims small enti		331116/	8.								
See 37 CFR 1.27				(if applicable, all necessary)							
3. X Specification Total Pages 89				a. Computer Readable Form (CFR)							
(preferred arrangement set forth below)				b. Specification Sequence Listing on: i. CD-ROM or CD-4 (2 copies);	j						
-Descriptive title of the inver -Cross Reference to Related			i. CD-ROM or CD-4 (2 copies); ii. or paper	1							
-Statement Regarding Fed sponsored R&D				c. Statements verifying identity of above							
-Reference to sequence listing, a table,				ACCOMPANYING APPLICATION PARTS							
-Background of the Invention		-	9.	X Assignment Papers (cover sheet & document	i(s))						
-Brief Summary of the Invention	n)						
-Brief Description of the Drawings (if filed				37 CFR 3.73(b) Power of Attorn	ey						
-Detailed Description				Statement (when there is an assignee)	Ī						
-Claim(s)			11.	English Translation Document (if applied	cable)						
-Abstract of the Disclosure			12.	IDS,	- 1						
			12.	X PTO/SR/ X Copies of IDS Citat	ions						
			Ì	08 & AJ-AN	1						
4. X Drawing(s) Total Sho	eets	12	13.	Preliminary Amendment							
Oath or Declaration			14.	X Return Receipt Postcard (MPEP 503	3)						
a. X Newly executed (original and a second control of the second c	ginal or co	ру)	15.	Certified Copy of Priority Documen	t l						
b. Copy from a prior ap	nlication (37	16.	Nonpublication Request under 35 U.S.C	,]						
CFR 1.63(d)) (for co				122(b)(2)(B)(i). Applicant must attacl							
Box 18 completed)			1	PTO/SB/35 or its equivalent.							
i. DELETION O			17.	Other:							
Signed statement atta inventor(s) named in		-	-								
see 37 CFR 1.63(d)(2	•	• •									
6. Application Data Sheet up	nder 37 C	FR 1.76									
18. IF A CONTINUING APPLICATION,	check appro	opriate box and s	upply the re	quisite information below and in a preliminary amendme	nt:						
Continuation Division	·		ion-in- Par	·							
Prior Appl. information: Exar	niner:			Group/Art Unit:							
				outh or declaration is supplied under Box 5b, is considered a part of the disclaration by solid by solid properties have been involved early confirm to							
application parts.	ебу исогрога	ed by reference. The i	icorporation <u>can</u>	nonly be relied upon when a portion has been inadvertently omitted from the	unflutted						
	19.	CORRESPON	DENCE A	DDRESS							
23125	or	ПСоп	acmondona	o oddysea bolow							
Customer Number Motorola, I	nc.	Con	espondenc	e address below							
Name Joanna G. Chiu Motorola, Inc. – Law	Departm	ent									
Address 7700 West Parmer L											
City Austin		State			8729						
	Celephone		a	Fax 43,629							
Name Joanna G. Chiu	-				===						
SIGNATURE SOLUTION				Date 9803							

	Complete if Known										
FEE	Application Nu	mber									
TRANSMITTAL	Filing Date										
Patent fees are subject to annual revision	First Named Inventor		William C. Moyer								
Applicant claims small entity status. See 37 CFR 1.27	Examiner Name				<u></u>						
			 								
TOTAL AMOUNT OF PAYMENT (\$) 1594	Group Art Unit		2046								
METHOD OF PAYMENT (check all that apply	Attorney Dock	et (NO.	SCI	3075TH		CULATION	(continu	ed)			
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X Deposit Account:		Entil		Ent							
Deposit Account Number 502117		Fee	Fee	Fee	Fee						
Deposit Account Name Motorola, Inc.		Code	(\$)	Code	(\$)	<u>Fee</u>	Description	<u>n</u>			
The Director is authorized to: (check all that apply)		1051	130	2051	65 05	Surcharge ~	-				
X Credit any over	erpayments	1052 1053	50 130	2052 1053	25 130	Surcharge ~ Non-English		iai illing	 		
X Charge any additional fee(s) during the pendency of this app	olication	1812	2520	1812	2520	For filing a re	equest for ex p	parte			
Charge fees(s) indicated below, except for the filing fee to	the	1004	000*	1004	0001	Reexamination					
above-identified deposit account.	uie	1804	920*	1804	920*	Requesting put Examiner act		prior to			
		1805	1840*	1805	1840*	Requesting p Examiner act		SIR after			
FEE CALCULATION		1251	110	2251	55	Extension for		first month			
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у		1400		2402	160	.,		an annual			
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		1451	1510	1451	1510	Petition to ins	titute a public	c use			
1001 750 2001 375 Utility filing fee 75	0	1452	110	2452	55	Petition to re	vive – unavoi	dable			
1002 330 2002 165 Design filing fee		1453	1300	2453	650	Petition to re					
1003 520 2003 260 Plant filing fee		1501	1300 470	2501 2502	650 235	Utility issue f		e)			
1004 750 2004 375 Reissue filing fee 1005 160 2005 80 Provisional filing fee		1502 1503	630	2502	315	Design issue Plant issue fe			 		
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SUBTOTAL (1) (\$) 750		1807	50	1807	50	Processing to	ee under 37 C	FR 1.17(q)			
2. EXTRA CLAIM FEES		1806	180	1806	180	Submission (
Previously Extra Fee from Paid** Claims below	Fee Paid	8021	40	8021	40	•	ach patent ass imes number of	•	40		
Total Claims 32 - 20 = 12 X 18	= 216	1809	750	2809	375		nission after fi				
Independent Claims 10 - 3 = 7 X 84	= 588	1010	750	2010	075		CFR § 1.129 fitional inventi				
Multiple Dependent 280	= [1810	750	2810	375	examined (3)			لــــا		
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1202 18 2202 9 Claims in excess of 20 1201 84 2201 42 Independent claims in excess of 3		Other fee	(snecify)			of a desig	n application				
1203 280 2203 140 Multiple dependent claim, if not paid	3	Office	(Specify)								
1204 84 2204 42 *Reissue independent claims over	original patent										
1205 18 2205 9 *Reissue claims in excess of 20 and	d over original										
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SUBTOTAL (2) (\$) 804 "OR NUMBER PREVIOUSLY PAID, IF GREATER THAN STANDARD ALLOWANCE.			ed by Ba	sic Filing	Fee paid	SUBTO	TAL (3)	(\$) 40	0.00		
**OR NUMBER PREVIOUSLY PAID, IF GREATER THAN STANDARD ALLOWANCE *For Reissues, see above	<u>.</u>										
SUBMITTED BY						Complete (f applicable				
Name (Print/Type) Joanna (Chiu		Registra	tion No.	43,62	9	Telep	none	(512) 9	96-6839		
Signature Date 9/8/03											
Signature Date 7/8/03											
(SC1307	5TH									